

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J. G.		7/7/89
O.I.P.E. CLASSIFIER		3.	7/5/89
FINALITY REVIEW		390	7/19/89

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1		9/20/89	03/04
2		9/20/89	10/13
3		9/20/89	02/03
4		9/20/89	02/03
5		9/20/89	02/03
6		9/20/89	02/03
7		9/20/89	02/03
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50		9/20/89	02/03

Claim	Final	Original	Date
51		9/20/89	03/04
52		9/20/89	10/13
53		9/20/89	02/03
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100		9/20/89	02/03

Claim	Final	Original	Date
101		9/20/89	03/04
102		9/20/89	10/13
103		9/20/89	02/03
104		9/20/89	02/03
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149		9/20/89	02/03
150		9/20/89	02/03

If more than 150 claims or 10 actions  
 staple additional sheet her

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